## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

ANNUAL REPORT (AR)							FILED				
DOCUMENT # P97000051350 1. Entity Name							May 01, 2006 08:00 A Secretary of State				
GLENN V	Vright C	ONSTRUCTIO	N & DEVELOPM	ENT, INC.		5	Seci	etar	y 01 S	late	
Principal Plac	e of Business	5	Mailing Addre	Mailing Address							
120 NE 4TH FORT LAUD		. 33301		120 NE 4TH ST. FORT LAUDERDALE FL 33301							
2. Principal F	Place of Busin	ess	3. Mailing Add	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #	Suite, Apt. #, etc.			1st MOORE CR2E034 (10/05)				
City & State			City & State	City & State			65-0794727			oplied For of Applicable	
Zio	Zip Country		Zıp	Zip Country		5. Certificat	e of Status Desired		\$8.75 Add	ditional	
	6. Name	and Address of Cur	Tent Registered Agen	t		7. Name an	d Address of New Re		•	JQ.	
				•	Name			2			
RICI	HARDSOI NE 4TH	N, GEX F		Street Address	Streel Address (P.O. Box Number is Not Acceptable)						
		RDALE FL 333	01				·	- · -		-	
					City		,	FL	Zip Cod	ie	
8. The above	named entity	y submits this statem	ent for the purpose of c	hanging its regi	stered office or regis	tered agent, or b	oth, in the State of Flor		amiliar with	, and accept	
the obligat	tions of regist	ered agent.									
SIGNATURE	Signature typert	or privited name of registered	agent and late it applicable:	(NOTE Reg	islored Agent signature requi	red when remstations)		DATE		<u> </u>	
		FEE IS \$150.00					9. Election Campai	ian Financi	na \$5	.00 May Be	
		6 Fee Will Be \$55 Florida Departme					Trust Fund Cont	•	<u> </u>	ed to Fees	
10.			AND DIRECTORS		11.	ADDITIONS	CHANGES TO OFFIC			IS IN 11	
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NAME STREET ADDRESS	WRIGHT, F 120 NE 4T				NAME STREET ADDRESS		10000000				
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MAME		LENN B JR		[	NAME						
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STREET ADDRESS					STREET ADD REC'D	101100	• -				
CITY-ST-ZIP	partify that the	a information average	id with this films dage	tot our life. for th		JAN 30	2006	f. with			
indicated of the co	f on this report reportation or t	rt or supplemental re he receiver or trustee	ed with this filing does in port is true and accurate empowered to execu- address, with all other life	e and that my s te this report as	ignature shall have th	e same legal effe 607, Florida Stati	ect as if made under o utes; and that my nam	ath, that I a	am an officer	r or director	
SIGNAT	TURF.	1h					3-2-06	9	54-76	13472	
	· • · · · · · · ·	SIGNATURE AND TYPE	D OR PRINTED NAME OF SIG	NING OFFICER OR D	IRECTOR		Date	0	aytimo Phono #		